FEC FORM 1

## STATEMENT OF ORGANIZATION

FOF	RM 1		ORGANIZATION										
				(See instru	ctions)				0	ffice use only			
1. NAME COMI	E OF MITTEE (i	n full)		(Check if name is changed)		mple: If typying, t the lines	ype	12FE4	IM5				
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2. DATE	Б <mark>м</mark>	м 3	24 / Y	2009									
3. FEC IDENTIFICATION NUMBER C C00368142													
4. IS TH	IIS STATE	MENT	NEW	(N) OF	R X	AMENDED	) (A)						
I certify that	I have exa	mined this §	Statement and	to the best of my	knowledge ar	nd belief it is true, o	correct and	d complete					
_			1/1	/illiam Schw	oitzer								
Type or Pr	int Name o	of Treasure	er	Villiaili Scriw	CITZCI								
Signature	of Treasur	er El <u>ec</u> i	ronically Filed	d by <b>William</b>	n Schweitz	er	_	Date	<b>0 4</b>	08	/ Y	2009	
NOTE: Sub	omission of	false, erron				the person signing				of 2 U.S.C.	S437g.		
	Office Use Only					For further information Federal Election Toll Free 800-42 Local 202-694-1	Commiss 4-9530			FEC F	ORM		